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FOR INSTRUCTIONS, SEE DACK OF FURIN		FURM	SINIEMEN
CHECK ONE:		DR-1	OF
This is an initial* Statement of Organization OCT 3 PA	1:27 Reset Form	(Rev. 04/2008)	ORGANIZATION
	· · — — — — — — — — — — — — — — — — — —	For Office Use	Only
*An initial Statement of Organization must be filed within 10 days of the co	mmittee's accepting contributions,	Comm. #	
making expenditures, or incurring indebtedness exceeding \$750. Amenda	nents must be filed within 30 days of	Indexed	
a change. Penalties may be imposed for late-filed Statements of Organiza	ition. A candidate with an open	Audited	
committee that exceeds \$750 in activity for another office shall file within 1	0 days either a new or amended	Computer	· · · · · · · · · · · · · · · · · · ·
DR-1 disclosing information concerning the campaign for the new office so	ught.	Computer	,,,,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
COMMITTEE NAME A conditional committee and be led at		7 dt	
COMMITTEE NAME 1 4 (A candidate's committee must include the candidate's last name in the name of the committee.)			
Committee to elect Dennis Hance			
IMPORTANT: Indicate type of committee you are reporting for: 5	7		
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)	j National de DAO (8 Notate Bender) (4	\0	
(5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue (including committee involved in multiple city/county ballot Issues)			
1 10 Vocason Postid of Ociet Louisces Oppositional LNO (11) Forest De	NOT ISSUE (INCIDENTE COMMITTEE INTO	aved in maluple cit	(County Dance (Seces)
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mand	latory except for a	candidate's committee)
	Name 🗸 🗸	acory except for a c	Jonata V Contraction
Name Dennis Hance	Traine V V		
Malling Address J. L.	Mailing Address ↓ ↓		
609 N. Williberry Street	mouning / tool cos + +		
Cityeston, IA Zidsofe 1 1	City, State ↓ ↓ Zip Code ↓ ↓		
Creston, TA 50801			
792 7677			
Phone (641) 782-7677 Phone ()			
		· · · · · · · · · · · · · · · · · · ·	
e-Mail	e-Mail		
INDICATE PURPOSE OF COMMITTEE - Check One Box Z Ac		dvocate for ballot iss	ue(s)
Comment or description:		dvocate against balk	
	County/Local Candidates		
All Candidates Enter: Office Sought: Board of Supervisors			
	County: Union		
Political Party (if applicable)	(If active in multiple ballot iss	ue elections, attach	list of counties
District: 3	11.4.20	ing.	
District:	Date of Election: 11-4-20		
Year Standing for Election: 2008			
Dank Assessed Maria (must match committee come)	Condidate pares 9 Address on 6	Dames Service (DACs	if applicable).
Bank Account Name (must match committee name)	Candidate name & Address or f		
		Affiliate, or Sponsor	
All campaign expenses paid from personal funds			
All campaign expenses paid from personal funds	↓ ↓ Dennis Hance		
	↓ ↓ Dennis Hance Mailing Address ↓ ↓		
All campaign expenses paid from personal funds	↓ ↓ Dennis Hance		
All campaign expenses paid from personal funds Name of Financial Institution/type of Account ↓ ↓	Dennis Hance Mailing Address ↓ ↓ 609 N. Mulberry Street	Affiliate, or Sponsor	
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All campaign expenses paid from personal funds Name of Financial Institution/type of Account Mailing Address City State Zip STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowe Administrative Code.	Dennis Hance Mailing Address	State ↓ ↓	Zip ↓ ↓ 68B and the administrative
All campaign expenses paid from personal funds Name of Financial Institution/type of Account Mailing Address City	Dennis Hance Mailing Address 609 N. Mulberry Street City	State ↓ ↓ State ↓ ↓	Zip ↓ ↓ 68B and the administrative one the required due dates
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